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**PATENT APPLICATION**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

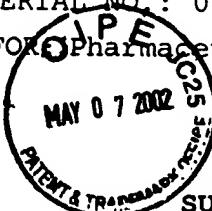
IN THE APPLICATION OF:  
Rajopadhye et al.

CASE NO.: DM-6958

SERIAL NO.: 09/281,474

FILED: March 30, 1999

FOR Pharmaceuticals for the Imaging of Angiogenic Disorders



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**SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT**

TECH CENTER 1600/2900

Commissioner of Patents  
Washington, D.C. 20231

Sir:

Pursuant to 37 C.F.R. §1.56 and in accordance with 37 C.F.R. §§1.97-1.98, information relating to the above-identified application is hereby disclosed. Inclusion of information in this statement is not to be construed as an admission that this information is material as that term is defined in 37 C.F.R. §1.56(b). Copies of each of the references listed on the attached Form PTO-1449 are enclosed herewith.

In accordance with §1.97(c), this Information Disclosure Statement is being filed after the period set forth in §1.97(b) but before the mailing date of either a Final Action under §1.113 or a Notice of Allowance under §1.311, therefore the fee of \$240.00 as set forth in §1.17(p) is attached.

Please charge any deficiency or credit any overpayment to Deposit Account No. 193880.

Respectfully submitted,

  
Peter L. Dolan  
Agent for Applicants  
Registration No. 46,307  
Telephone (302) 695-7776

February 21, 2002  
(Date)

05/10/2002 RMEBRAHT 00000033 193880 09281474  
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Cathleen M. Collins

Signature

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Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

- 1) Supplemental IDS for USSN 09/281,474
- 2) PTO/SB/08A for USSN 09/281,474
- 3) Fee Transmittal for IDS for USSN 09/281,474

# FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

**TOTAL AMOUNT OF PAYMENT** (\$ ) **240.00**

Complete If Known

Application Number	09/281,455
Filing Date	March 30, 1999
First Named Inventor	Rajopadhye
Attorney Docket No.	PH-7330-P1

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**METHOD OF PAYMENT (check one)**

1.  The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number  
193880

Deposit Account Name  
Bristol-Myers Squibb Company

Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

Applicant claims small entity status. See 37 CFR 1.27

2.  Payment Enclosed:

Check     Credit card     Money Order     Other

**FEE CALCULATION**

1. **BASIC FILING FEE**

Large Entity Fee Code	Fee (\$)	Small Entity Fee Code	Fee (\$)	Fee Description	Fee Paid
101	740	201	355	Utility filing fee	
108	330	206	160	Design filing fee	
107	510	207	245	Plant filing fee	
108	740	208	355	Reissue filing fee	
114	160	214	75	Provisional filing fee	

**SUBTOTAL (1)**

(\$)

2. **EXTRA CLAIM FEES**

Total Claims	-20**	=	Extra Claims	X	Fee from below	=	Fee Paid
Independent Claims							
Multiple Dependent	-3**	=	0	X		=	0

Large Entity Fee Code	Fee (\$)	Small Entity Fee Code	Fee (\$)	Fee Description	Fee Paid
103	18	203	9	Claims in excess of 20	
102	84	202	40	Independent claims in excess of 3	
104	280	204	135	Multiple dependent claim, if not paid	
109	84	209	40	** Reissue independent claims over original patent	
110	18	210	9	** Reissue claims in excess of 20 and over original patent	

**SUBTOTAL (2)**

(\$ 0)

**FEE CALCULATION (continued)**

**3. ADDITIONAL FEES**

Large Entity Fee Code	Fee (\$)	Small Entity Fee Code	Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for ex parte reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	400	216	195	Extension for reply within second month	
117	920	217	445	Extension for reply within third month	
118	1,440	218	695	Extension for reply within fourth month	
128	1,960	228	945	Extension for reply within fifth month	
119	310	219	155	Notice of Appeal	
120	310	220	155	Filing a brief in support of an appeal	
121	270	221	135	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,240	241	620	Petition to revive - unintentional	
142	1,240	242	620	Utility issue fee (or reissue)	
143	440	243	220	Design issue fee	
144	600	244	300	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	130	123	50	Petitions related to provisional applications	
126	240	126	240	Submission of Information Disclosure Stmt	\$240
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	710	246	355	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	710	249	355	For each additional invention to be examined (37 CFR § 1.129(b))	
179	710	279	355	Request for Continued Examination	
169	900	169	900	Request for expedited examination of a design application	

Other fee (specify)

\*Reduced by Basic Filing Fee Paid

**SUBTOTAL (3)**

(\$ 240.00)

\*\*or number previously paid, if greater; For Reissues, see above

**SUBMITTED BY**

Complete (if applicable)

Name (Print/Type)	Peter L. Dolan	Registration No. Attorney/Agent)	46,307	Telephone	(302) 695-7776
Signature				Date	Feb 22, 2002

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

**Burden Hour Statement:** This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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